FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. **SECTION 4(6), AND/OR**

12888.	Z3
<i>y</i>	9

OMB APPROVAL OMB Number: 3235-0076 Expires: May 31, 2005 Estimated average burden hours per response.....16.00

SE	C USE ONLY	
Prefix	Serie	ı
		_
D#	TE RECEIVED	
	1 1	
DA	TE RECEIVED	

UNIFORM LIMITED OFFERING EXEM	PTION
Name of Offering (check if this is an amendment and name has changed, and indicate change.) Offering of Limited Partnership Interests	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)	ULOE
Type of Filing: New Filing Amendment	DDA ARAA
	PROCESSE
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	(i APR 29 2004
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	THOMSON
OMG V, Limited Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(·····································	, , ,
1705 S. Capital of Texas Hwy, Ste. 130, Austin, TX 78746 Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	(512) 732-0435 Telephone Number (Including Area Code)
Brief Description of Business	26 N. N
Capital equipment leasing (retail POS advertising kiosks)	
Type of Business Organization corporation X limited partnership, already formed other (p	please specify): APR 2.7 2004
Month Year Actual or Estimated Date of Incorporation or Organization: 014 014 Actual Estir Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	nated
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D of 77d(6).	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not

1 of 9

							 -		
	<u> </u>		A. BASIC ID	ENTI	FICATION DATA	-,,	· · · · · · · · · · · · · · · · · · ·		
2. Enter the information re									
• Each promoter of t	he issuer, if the iss	suer has b	een organized v	vithin	the past five years;				
			-		-				ss of equity securities of the issuer
				corpo	rate general and mar	naging	partners of	f partn	ership issuers; and
Each general and r	nanaging partner o	f partners	hip issuers.			_			
Check Box(es) that Apply: Hill Country Interests,	Promoter Inc.	☐ Be	neficial Owner		Executive Officer		Director	X	General and/or Managing Partner
Full Name (Last name first, i									
1705 S. Capital of Texa	is Hwy., Ste. 1.	30, Aust	tin, TX 7874	16					
Business or Residence Addre	ss (Number and	Street, Ci	ty, State, Zip C	ode)					
Check Box(es) that Apply:	X Promoter	☐ Bei	neficial Owner		Executive Officer		Director	X	General and/or
Sepulga Group, Inc.									Managing Partner
Full Name (Last name first, i	-								
115 St. Joseph Street, 2								-	····
Business or Residence Addre	ss (Number and	Street, Ci	ty, State, Zip C	ode)					
Check Box(es) that Apply:	Promoter	☐ Ber	neficial Owner		Executive Officer		Director	X	General and/or
Unity Financial & Insu Full Name (Last name first, i		Inc.							Managing Partner
334 Main Street, Sauk		5378							
Business or Residence Addre			ty, State, Zip Co	ode)					
Check Box(es) that Apply:	X Promoter	☐ Ber	neficial Owner		Executive Officer		Director	X	General and/or Managing Partner
Rodd, Jeffrey C. Full Name (Last name first, i	f individual)								
32820 U.S. Hwy. 71, R	edwood Falls,	MN 56	283						
Business or Residence Addre	ss (Number and	Street, Cit	y, State, Zip Co	ode)	<u></u>				
Check Box(es) that Apply:	Promoter	☐ Ber	neficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)								
Business or Residence Address	ss (Number and	Street, Cit	y, State, Zip Co	ode)					
Check Box(es) that Apply:	Promoter	☐ Ber	eficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, it	f individual)								
Business or Residence Addre	ss (Number and	Street, Cit	y, State, Zip Co	ode)					
Check Box(es) that Apply:	Promoter	□ Вел	eficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, in	f individual)								
Business or Residence Addre	ss (Number and	Street, Cit	y, State, Zip Co	ode)					
<u> </u>	(Use blar	ik sheet, o	or copy and use	additio	onal copies of this sh	nect, a	s necessary)	

													
	<u>:</u>				B. 1	NFORMAT	ION ABOU	T OFFER	ING		 		<u> </u>
	TT 45 -		4 4	(.		.11 42		·	41.1			Yes	No
1.	Has the	issuer soi	a, or aces t			·				-		X	Ц
						n Appendix		_					
2.	What is	the minin	num investr	nent that v	vill be acce	epted from	any individ	fual?	•••••	***************	***************************************	\$ <u>25,</u>	000.00
3.	Does th	e offering	nermit ioin	t ownersh	in of a sind	ale unit?					***************************************	Yes	No IVI
4 .		_	•		-	_					lirectly, any		X
٧.	commis If a pers	ssion or sin son to be li	nilar remune sted is an as	ration for sociated pe	solicitation erson or ag	of purchasent of a bro	ers in conn ker or deald	ection with er registere	sales of se d with the S	curities in SEC and/or	the offering. with a state sons of such		
			, you may s							, , ,			
Ful	Name (Last name	first, if ind	ividual)	·····	· ···················							
Bus	iness or	Residence	Address (N	lumber and	d Street, C	ity, State, 2	Zip Code)						
Nar	ne of As	sociated B	roker or De	aler									
Stat	es in Wi	nich Person	Listed Ha	Solicited	or Intende	s to Solicit	Purchasers			····			
	(Check	"All State	s" or check	individual	States)	•••••	••••••	•••••		•••••		☐ Al	Il States
	AL	AK	[AZ]	AR	CA	CO	CT	DE	DC	FL	GA)	HI	[ID]
			[AZ]	KS	KY	[LA]	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC	[ND]	OH	OK	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Full	Name (Last name	first, if ind	ividual)			· · · · · · · · · · · · · · · · · · ·						
			,										
Bus	iness or	Residence	e Address (1	Number an	d Street, C	City, State,	Zip Code)						
			roker or De										
Nan	ne of As	sociated B	roker or De	aier									
Stat	es in Wh	nich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All State	s" or check	individual	States)							□ A1	1 States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	H	
		IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR
	KI	(30)	(3D)	TIA	<u> </u>	<u> </u>			WA:				
Full	Name (Last name	first, if ind	ividual)									
<u> </u>	•	Desidence	Address (?	b	d Canada C	New State	7:a Cada)						
Bus	iness or	Residence	Address (1	Number an	a Sircei, C	nty, State,	Zip Code)						
Nan	ne of As	sociated B	roker or De	aler									
<u></u>	oo in 1171	ich Dans	Listed Has	Soliaitad	or Intende	to Solicit	Purchaser						
Stat												[□ A1	l States
	(Спеск	All State	s" or check	IBUDIVIDNI	States)				***************************************	****************	.,	سم ب	44440
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI		MS	MO
	MT	NE	NV	NH	NJ	MM	NY	NC	ND	OH		OR	PA
	RI	SC	SD	TN	TX	UT	[VT]	VA	WA	WV	WI	WY	PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security	Aggregate Offering Price		An	nount Aiready Sold
	Debt	s 0	!	\$	0
	Equity		_ `	 §	
	Common Preferred		- `		
	Convertible Securities (including warrants)	s 0	•	\$	0
	Partnership Interests		00 (10	00,000.00
	Other (Specify)		_	 S	0
	Total		00 1	<u> </u>	
	Answer also in Appendix, Column 3, if filing under ULOE.		_ `		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors		0	Aggregate ollar Amount f Purchases
	Accredited Investors		-	\$ <u>1</u>	00,000.00
	Non-accredited Investors		-	\$	0
	Total (for filings under Rule 504 only)	<u>NA</u>	-	\$	NA
	Answer also in Appendix, Column 4, if filing under ULOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.				
		Type of		De	ollar Amount
	Type of Offering	Security		•	Sold
	Rule 505				
	Regulation A				
	Rule 504				
	Total		3	\$	
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	·			
	Transfer Agent's Fees		} \$		0
	Printing and Engraving Costs] \$		1,000.00
	Legal Fees] \$		5,500.00
	Accounting Fees		\$		4,500.00
	Engineering Fees) \$	<u>-</u>	0
	Sales Commissions (specify finders' fees separately)		} \$		0
	Other Expenses (identify)] \$		0
	Total	_	1 S	: 1	1,000.00

L	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPEN	SES AND USE OF PR	OCEEDS	•	
	b. Enter the difference between the aggregate offering price given in response to P and total expenses furnished in response to Part C — Question 4.a. This difference is proceeds to the issuer."	s the "adjusted gross			\$_4,989,000.00
5.	Indicate below the amount of the adjusted gross proceed to the issuer used or propeach of the purposes shown. If the amount for any purpose is not known, furnicheck the box to the left of the estimate. The total of the payments listed must equa proceeds to the issuer set forth in response to Part C — Question 4.b above.	ish an estimate and			
			Payment Office Director Affiliate	rs, s, &	Payments to Others
	Salaries and fees		<u>\$_0</u>		_ \$ <u>0</u>
	Purchase of real estate		\$ _0		<u> </u>
	Purchase, rental or leasing and installation of machinery		_		
	and equipment				
	Construction or leasing of plant buildings and facilities		\$0		□ \$ <u> </u>
	Acquisition of other businesses (including the value of securities involved in the offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		s 0		□\$ 0
	Repayment of indebtedness				□ \$ 0
	Working capital	_			□ s 0
	Other (specify):				
			\$ <u>0</u>		\$ <u></u> 0
	Column Totals		\$ <u>0</u>		\$4,989,000 .0
	Total Payments Listed (column totals added)	•••••••••••••••••••••••••••••••••••••••] \$ 4,9	89,000.00
	D. FEDERAL SIGNATUR	RE.			
sigi	e issuer has duly caused this notice to be signed by the undersigned duly authorized produce constitutes an undertaking by the issuer to furnish to the U.S. Securities and information furnished by the issuer to any non-accredited investor pursuant to particle.	erson. If this notice is Exchange Commissi	on, upon		
İssı	uer (Print or Type) Signature	/ Da	_		•
_	DMG V, Limited J- Waved	4 per S	04/2	4/0	24
	me of Signer (Print or Type) Title of Signer (Print or Type) Title of Signer (Print or Type) If il Country Int	e) tests Inc.	,	,	
	David Spitzer President Managing General Partner	er of OMG \/ Limite	يا.		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)